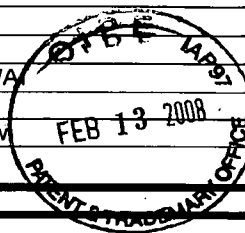


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Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT Date Submitted: February 13, 2008 <i>(use as many sheets as necessary)</i>				Complete if Known	
Application Number		10/574,860			
Filing Date		10/7/2004			
First Named Inventor		Shigeto KAWA			
Art Unit		1643			
Examiner Name		Anne Gussow			
Attorney Docket Number		053466-0414			



U.S. PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Foreign Patent Document Country Code ³ Number ⁴ Kind Code ⁵ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Documents	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
/AMG/	B1	EP 0 997 152 A1	05/03/2000	Chugai Seiyaku Kabushiki Kaisha		
/AMG/	B2	WO 01/75177 A2	10/11/2001	The Government of the United States of America as represented by The Secretary, Department of Health and Human Services		

NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.) date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ⁶

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